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FRATTI 15

# INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Applicant: FRATTI

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## U.S. PATENT DOCUMENTS

Examiner's Initials*	Document Number	Date MM/DD/YY	Name (Family Name of First Inventor)	Class	SubClass	Filing Date (if appropriate)
AR						
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OTHER (Including in this order Author, Title, Periodical Name, Date, Pertinent Pages, etc.)

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